



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

FILE

REPLY TO THE ATTENTION OF:

NOV 25 1997

SE-5J

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

US EPA RECORDS CENTER REGION 5



486758

Devon Bank
Trustee for Trust No 3256
6445 N. Western Ave.
Chicago, IL 60645

Re: Request for Information Pursuant to Section 104(e) of CERCLA
S. Indiana Vacant Lot Site in Chicago, Cook County, Illinois

Dear Sir or Madam:

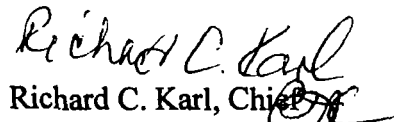
On October 29, 1997, the United States Environmental Protection Agency (U.S. EPA) issued an information request to Devon Bank (the Bank) pursuant to Section 104(e) of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) as amended, 42 U.S.C. § 9604(e). The information request was served on the Bank by certified mail on October 31, 1997. This information request required the Bank to provide certain documents and information within 21 days of receipt of the letter.

Although the deadline for the Bank's response has passed, U.S. EPA has not received any response to the information request. U.S. EPA therefore requests that you comply immediately with that information request. You may, if you desire, assert a business confidentiality claim covering part or all of the information requested, in the manner described by 40 CFR 2.203 (b). Information covered by such a claim will be disclosed by U.S. EPA only to the extent, and only by means of the procedures, provided in 40 CFR Part 2, Subpart B. If no such claim accompanies the information when it is received by U.S. EPA, it may be made available to the public by U.S. EPA without further notice to the Bank.

Continued failure to comply with U.S. EPA's information request, or to adequately justify such failure to respond, may subject the Bank to an enforcement action seeking to compel compliance and collect penalties of up to \$27,500 per day of noncompliance pursuant to Section 104(e)(5) of CERCLA, 42 U.S.C. § 9604(e)(5). U.S. EPA has the authority to use the information requested herein in an administrative, civil, or criminal action.

Please contact Jose DeLeon, Assistant Regional Counsel, at (312) 353-7456 if you have any legal questions regarding this matter. All other questions should be directed to Sally Jansen, Emergency Enforcement & Support Section, at (312) 353-9046.

Sincerely yours,


Richard C. Karl, Chief
Emergency Response Branch

SITE:
TYPE OF LETTER SENT:
TO:

DATE SENT:
ARTICLE NO.:

S. INDIANA VACANT LOT
FOLLOW-UP IR (NO RESPONSE)
DEVON BANK
TRUSTEE FOR TRUST 3256
NOVEMBER 25, 1997
P 371 903 942

P 371 903 942

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

DEVON BANK

TRUSTEE FOR TRUST NO 3256

6445 N WESTERN AVE

CHICAGO IL 60645

Postage	\$ 58
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.00
Postmark or Date	



S. Jansen
PS Form 3800, April 1995
SE-57

Indiana Vacant Lot

Stick postage stamps to article to cover First-Class postage, certified mail fee, and charges for any selected optional services (*See front*).

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached, and present the article at a post office service window or hand it to your rural carrier (*no extra charge*).
2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach, and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you make an inquiry.

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DEVON BANK
TRUSTEE FOR TRUST NO 3256
6445 N WESTERN AVE
CHICAGO IL 60645

4a. Article Number

P 371 903 942

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-01-97

5. Received By: (Print Name)**8. Addressee's Address (Only if requested and fee is paid)****6. Signature: (Addressee or Agent)**

X

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

**SALLY JANSEN
US EPA SE-5J
77 W JACKSON BLVD
CHICAGO, IL 60604-3590**

S. Indiana Vacant Lot

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